

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) American College of Radiology Association Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00343459	
Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name (Last, First, Middle Initial) of Payee Mammen Group Inc.		Date M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2012	
Mailing Address 1901 L Street, N.W. Suite 650		Amount 23859.75	
City Washington State DC Zip Code 20036		Transaction ID : V83864EBD7AE6187BF00	
Purpose of Expenditure Printed Advertising for Mailing		Office Sought: ☒ House State: IA ☐ Senate District: 01 ☐ President	
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Bruce L. Braley		Check One: ☒ Support ☐ Oppose	
Calendar Year-To-Date Per Election for Office Sought 23859.75		Disbursement For: ☐ Primary ☒ General ☐ Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee		Date	
Mailing Address		M M M / D D D / Y Y Y Y Y Y	
City State Zip Code		Amount	
Purpose of Expenditure		Office Sought: ☐ House State: _____ ☐ Senate District: _____ ☐ President	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: ☐ Support ☐ Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		23859.75	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....		23859.75	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
DR. William Herrington		[Electronically Filed]	
Signature		Date M M M / D D D / Y Y Y Y Y Y 09 / 24 / 2012	